

CLAIMS ONLY							Application Number <u>10/061 344</u>		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51					
2		/					52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10		/					60					
11							61					
12							62					
13		/					63					
14							64					
15							65					
16							66					
17	/						67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24	/						74					
25	/						75					
26		/					76					
27		/					77					
28		/					78					
29		/					79					
30		/					80					
31		/					81					
32		/					82					
33		/					83					
34		/					84					
35		/					85					
36		/					86					
37		/					87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					